

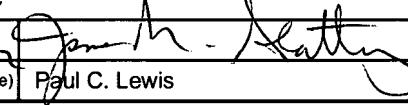


Under the Paperwork Reduction Act of 1995, no person are required to respond to a collection of information unless it displays a valid OMB control number.

<b>Effective on 12/08/2004.</b> <b>Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).</b> <b>FEE TRANSMITTAL</b> <b>For FY 2007</b>		<b>Complete if Known</b>	
		Application Number	10/681,156-Conf. #6433
		Filing Date	October 9, 2003
		First Named Inventor	Mitsunori MIKI
		Examiner Name	J. A. Patel
		Art Unit	2635
<input type="checkbox"/>	Applicant claims small entity status. See 37 CFR 1.27	TOTAL AMOUNT OF PAYMENT (\$ 120.00)	
		Attorney Docket No.	2927-0155P

<b>METHOD OF PAYMENT</b> (check all that apply)					
<input type="checkbox"/>	Check	<input type="checkbox"/>	Credit Card	<input type="checkbox"/>	Money Order
<input type="checkbox"/>	None	<input type="checkbox"/>	Other (please identify): _____		
<input checked="" type="checkbox"/>	Deposit Account	Deposit Account Number: <u>02-2448</u>	Deposit Account Name: <u>Birch, Stewart, Kolasch &amp; Birch, LLP</u>		
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)					
<input type="checkbox"/>	Charge fee(s) indicated below	<input type="checkbox"/>	Charge fee(s) indicated below, except for the filing fee		
<input type="checkbox"/>	Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17	<input checked="" type="checkbox"/>	Credit any overpayments		

<b>FEE CALCULATION</b>						
<b>1. BASIC FILING, SEARCH, AND EXAMINATION FEES</b>						
<b>Application Type</b>	<b>FILING FEES</b>		<b>SEARCH FEES</b>		<b>EXAMINATION FEES</b>	
	<b>Fee (\$)</b>	<b>Small Entity</b>	<b>Fee (\$)</b>	<b>Small Entity</b>	<b>Fee (\$)</b>	<b>Small Entity</b>
Utility	300	150	500	250	200	100
Design	200	100	100	50	130	65
Plant	200	100	300	150	160	80
Reissue	300	150	500	250	600	300
Provisional	200	100	0	0	0	0
<b>2. EXCESS CLAIM FEES</b>						
<b>Fee Description</b>						
Each claim over 20 (including Reissues) _____ 50 25						
Each independent claim over 3 (including Reissues) _____ 200 100						
Multiple dependent claims _____ 360 180						
<b>Total Claims</b>	<b>Extra Claims</b>	<b>Fee (\$)</b>	<b>Fee Paid (\$)</b>	<b>Multiple Dependent Claims</b>		
7	-	=	x _____ = _____	<b>Fee (\$)</b>	<b>Fee Paid (\$)</b>	
HP = highest number of total claims paid for, if greater than 20.						
<b>Indep. Claims</b>	<b>Extra Claims</b>	<b>Fee (\$)</b>	<b>Fee Paid (\$)</b>			
3	-	=	x _____ = _____			
HP = highest number of independent claims paid for, if greater than 3.						
<b>3. APPLICATION SIZE FEE</b>						
If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).						
<b>Total Sheets</b>	<b>Extra Sheets</b>	<b>Number of each additional 50 or fraction thereof</b>		<b>Fee (\$)</b>	<b>Fee Paid (\$)</b>	
_____	- 100 = _____	/50 (round up to a whole number) x _____ = _____				
<b>4. OTHER FEE(S)</b>						
Non-English Specification, \$130 fee (no small entity discount)						
Other (e.g., late filing surcharge): <u>1251 Extension for response within first month</u> 120.00						

<b>SUBMITTED BY</b>	
Signature	
Name (Print/Type)	Paul C. Lewis #28380
Registration No. (Attorney/Agent)	43,368
Telephone	(703) 205-8000
Date	April 6, 2007



Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

<b>PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)</b> <b>FY 2006</b> (Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).)		Docket Number (Optional) 2927-0155P
Application Number	10/681,156-Conf. #6433	Filed October 9, 2003
For	METHOD AND APPARATUS OF MEASURING ROTATIONAL AND FLIGHT CHARACTERISTICS OF SPHERE	
Art Unit	2635	Examiner J. A. Patel

This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.

The requested extension and fee are as follows (check time period desired and enter the appropriate fee below):

	<u>Fee</u>	<u>Small Entity Fee</u>	
<input checked="" type="checkbox"/> One month (37 CFR 1.17(a)(1))	\$120	\$60	\$ 120.00
<input type="checkbox"/> Two months (37 CFR 1.17(a)(2))	\$450	\$225	\$ _____
<input type="checkbox"/> Three months (37 CFR 1.17(a)(3))	\$1020	\$510	\$ _____
<input type="checkbox"/> Four months (37 CFR 1.17(a)(4))	\$1590	\$795	\$ _____
<input type="checkbox"/> Five months (37 CFR 1.17(a)(5))	\$2160	\$1080	\$ _____

Applicant claims small entity status. See 37 CFR 1.27.

A check in the amount of the fee is enclosed.

Payment by credit card. Form PTO-2038 is attached.

The Director has already been authorized to charge fees in this application to a Deposit Account.

The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number 02-2448. I have enclosed a duplicate copy of this sheet.

I am the  applicant/inventor.  
 assignee of record of the entire interest. See 37 CFR 3.71.  
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).  
 attorney or agent of record. Registration Number 43,368  
 attorney or agent under 37 CFR 1.34.

Registration number if acting under 37 CFR 1.34

April 6, 2007

Date

(703) 205-8000

Telephone Number

Signature

Paul C. Lewis

Typed or printed name

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

Total of 1 forms are submitted.

04/09/2007 SZEWDIE1 00000090 022448 10681156

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